FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS 2 minus 20=	Effective October 1, 2000 09/89853							
NUMBER FILED NUMBER EXTRA NUMBER N	OMALE ETTILITY OTHER TIME							
NUMBER FILED NUMBER EXTRA	TOTAL CLAIMS 20			RATI	E FEE	1	RATE	FEE
MULTIPLE DEPENDENT CLAIMS PRESENT If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) REMAINING AFTER AMENDENT PREVIOUSLY PAID FOR TOTAL FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL (Column 1) (Column 2) (Column 3) RATE TOTAL ADDIT FEE X40= OR X80= TOTAL OR TOTAL OR ADDIT HAT TOTAL ADDIT FEE X40= OR X80= TOTAL OR ADDIT FEE AMENDMENT FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL AMENDMENT TOTAL OR ADDIT FEE ADDIT FEE X40= OR X80= TOTAL OR ADDIT FEE ADDIT FEE TOTAL OR ADDIT FEE TOTAL OR ADDIT FEE TOTAL OR ADDIT FEE TOTAL OR ADDIT FEE ADDIT FEE TOTAL OR ADDIT FEE OR X\$18= TOTAL OR ADDIT FEE TOTAL OR ADDIT FEE OR X\$18= OR X\$	FOR	NUMBER FILED	NUMBER EXTRA	BASIC	FEE 355.00	OR	BASIC FEE	·710.00
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If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.					ł		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE								

Application or Docket Number